| AMENDMENT TRANSMITTAL LETTER                    |  |                              |                                   |            |             | Docket No.<br>04536/034001 |              |
|---|--|------------------------------|-----------------------------------|------------|-------------|----------------------------|--------------|
| Application No.                                 |  | Filing Date                  |                                   | Examiner   |             |                            | Art Unit     |
| 10/811,421-Conf. #2620                          |  | March 26, 2004               |                                   | T. Hailu   |             |                            | 2109         |
| olicant(s): Fus                                 | ao Ishiguchi                               |                              |                                   |            |             |                            |              |
| ention: VIDEO                                   | MENT FOR DI<br>DISC USING I<br>PPARATUS FO | PRESCRIBED                   | INFORMATI                         | ON SERV    | /ING AS K   | EY, AND                    |              |
| ransmitted here                                 | with is an ame                             |                              | above-identif                     | ied applic |             |                            |              |
| ne ree nas beer                                 | calculated and                             |                              | S AS AMENI                        |            |             | ~~                         |              |
|   | Claims Highest                             |                              |                                   |            |             |                            |              |
|   | Remaining<br>After<br>Amendment            | Number<br>Previously<br>Paid | Number<br>Extra Claims<br>Present | R:         | ate         |                            |              |
| Total Claims                                    | 8  | - 20 =                       | 0                                 | х          | 50.00       |                            | 0.00         |
| Independent<br>Claims                           | 3  | - 3 =                        | 0                                 | х          | 200.00      |                            | 0.00         |
| Multiple Depend                                 | lent Claims (ch                            | eck if applicabl             | le)                               |            |             |                            |              |
| Other fee (pleas                                | e specify):                                |                              |                                   |            |             |                            |              |
| TOTAL ADDIT                                     | IONAL FEE FO                               | OR THIS AME                  | NDMENT:                           |            |             |                            | 0.00         |
| x Large Entity                                  |  | JIC TIMO FIME                |                                   | □  Sr      | nall Entity |                            |              |
| x No additions                                  |  | d for this ame               | ndment                            |            | ,           |                            |              |
| =   |  |                              |                                   | n the amo  | unt of \$   |                            |              |
| A duplicate                                     | ge Deposit Acc<br>copy of this she         | eet is enclosed              | i.                                |            | -           |                            |              |
|   | ne amount of \$                            |                              |                                   | the filing | fee is encl | osed.                      |              |
| Payment by                                      | credit card. Fo                            | orm PTO-2038                 | is attached.                      |            |             |                            |              |
| X The Director<br>as described                  |  | orized to char               | ge and credit                     | Deposit /  | Account No  | o50                        | -0591        |
| x Credit a                                      | ny overpaymer                              | nt.                          |                                   |            |             |                            |              |
| x Charge  | any additional fil                         | ing or application           | on processing                     | fees requi | red under 3 | 7 CFR 1.                   | 16 and 1.17. |
| /   |  |                              |                                   |            |             |                            | - 00 0007    |
| Jonathan F. Os                                  | )a   |                              |                                   | Da         | ated: Se    | eptembe                    | r 20, 2007   |
| Attorney/Agent                                  | Reg. No.: 33,                              | 986                          |                                   |            |             |                            |              |
| OSHA · LIANG<br>1221 McKinney<br>Houston, Texas | St., Suite 280<br>5 77010                  | 0                            |                                   |            |             |                            |              |
|   | )  |                              |                                   |            |             |                            |              |
| (713) 228-8600                                  | )  |                              |                                   |            |             |                            |              |